

TO: Historic Preservation Commission
FROM: Community Development Department
RE: 2016 CLG Annual Report
DATE: December 28, 2016
REQUEST: Submittal of the annual report to SHPO

BACKGROUND: Each year the City must complete the Certified Local Government (CLG) annual report form and submit it to the State Historic Preservation Office (SHPO) for review.

The report requires basic information about the number of properties modified, destroyed, altered, added and/or delisted from our local landmark inventory. In addition, the report requests information on how the Commission interacts with the community and various other groups.

A draft of the report is included for your review. Please review the report carefully and be prepared to present any suggested modifications at the January 4, 2017 meeting.

RECOMMENDATION: The Community Development Department recommends making any necessary changes, providing the report to the Mayor for signature and returning the report to SHPO as required.

A handwritten signature in blue ink, reading "Rose E. Brown", with a large, sweeping flourish extending to the right.

Rose E. Brown, AICP
Planning Coordinator
Community Development Department

[For SHPO use only]		
Received _____		
Minimum no. of meetings?	yes	no
Required training?	yes	no
Fully appointed commission?	yes	no
Has the commission been active?	yes	no
Has the commission accomplished at least one project?	yes	no
Comments:		

Approved/CLG in good standing	yes	no
More information requested _____		

**IOWA CERTIFIED LOCAL GOVERNMENT
2016 ANNUAL REPORT (January 2016-December 2016)**

NAME OF THE CITY, COUNTY, OR LAND USE DISTRICT: City of Council Bluffs, Iowa

Section I.
Locating Historic Properties
Identification, Evaluation, and Registration Activity

CLG Standards found in CLG Agreement and National Historic Preservation Act

- ◆ The CLG shall maintain a system for the survey and inventory of historic and prehistoric properties in a manner consistent with and approved by the STATE.
- ◆ The CLG will review National Register nominations on any property that lies in the jurisdiction of the local historic preservation commission.

1. Please provide complete reports and site inventory forms from historic identification/survey, evaluation, and/or registration/nomination projects that your commission completed in 2016. Do not include projects that were funded with a CLG grant or mandated by the Section 106 review and compliance process as we already have these in our files. N/A

2. How many National Register of Historic Places (NRHP) properties in your City, County, or LUD were altered, moved, or demolished in 2016? Please identify the property (historic name and address) and the action **The Council Bluffs Historic Preservation Commission (HPC) approved exterior design modifications and issued a Certificate of Appropriateness for the following historically designated properties:**

- a. 523 South Main Street is a contributing building in the Commercial Historic Haymarket District. The HPC approved new signage and replacement storefront windows on the building's front facade.
- b. 621 South Main Street is a contributing building in the Commercial Historic Haymarket District. The HPC approved the following exterior renovations:
 - i. Removal of a front security fence;
 - ii. Wrapping exposed iron supports in wood columns;
 - iii. Covering vertical siding with more time period accurate wainscoting;
 - iv. Replacing windows/doors and associated wood trim; and
 - v. Repairing deteriorated masonry and stucco walls.
- c. 200 Pearl Street is a locally designated landmark known as the Council Bluffs Free Public Library. The HPC approved the continued use of temporary directional signage in the windows on the east and north building façades.
- d. 521 South Main Street is a contributing building in the Commercial Historic Haymarket District. The HPC approved new signs in the windows on the front of the building.
- e. 154 West Broadway is a contributing building in the 100 Block of the West Broadway Historic District. The HPC approved the following exterior modifications:
 - i. Expansion of the rear patio area and enclosing it with fencing to match the existing;
 - ii. Replacing the front awning with a solid black awning on the same frame;
 - iii. Adding a business logo/sign above the awning on the front of the building;
 - iv. Adding a light above the logo sign on the front of the building;
 - v. Adding a sign in the lower level front window panels; and
 - vi. Adding a detached sign in the rear of the bar; painted on barn board sign face.
- f. 130 West Broadway is a contributing building in the 100 Block of the West Broadway Historic District. The HPC approved a new awning sign on the front building façade.
- g. 134 West Broadway is a contributing building in the 100 Block of the West Broadway Historic District. The HPC approved a new awning sign on the front building façade.
- h. 231 South Main Street is a contributing building in the Commercial Historic Haymarket District. The HPC approved a wall sign on the south building façade.
- i. 506 South Main Street is a contributing building in the Commercial Historic Haymarket District. The HPC approved the installation of raised panels underneath the first floor windows on the east and west building facades.

3. In 2016, how many additional properties did your city place on its list of locally designated historic landmarks and/or historic districts? None.

If you have questions about whether you have a locally designation program or not, please contact Paula Mohr before you complete this section.

(As a reminder, before your elected officials approve or change local districts or ordinances, you must send a copy to the State Historic Preservation Office for review and comment.) Please attach a copy of the final designation nomination(s) and ordinance(s).

Date the ordinance(s) reviewed and commented by SHPO. N/A

4. In 2016, what were the actions to revise, amend, change, or de-list a locally designated property? Please attach documentation of the review and appeal process and decisions made by the historic preservation commission, planning and zone commission, city Council, District Court or other governmental agency or official involved with the process. (use additional pages if needed) N/A

Section II

Managing, Protecting, and Preserving Historic Properties

- ◆ The CLG will enforce all appropriate state and local ordinances for designating and protecting historic properties
- ◆ The CLG shall provide for adequate public participation in the local historic preservation programs

5. Did your city, county, LUD or its historic preservation commission undertake any of the following activities in 2016? Please think broadly about this question and include any activity (small or large) that facilitated historic preservation in your community. This is your opportunity to boast about your accomplishments and get credit for the great work you do! (use additional pages if needed)

- a. Historic preservation planning. Examples include the development or revision of a preservation plan, development of a work plan for your commission, etc. (use additional pages if needed) N/A
- b. Provided technical assistance on historic preservation issues or projects. Examples include working with individual property owners, business owners, institutions to identify appropriate treatments and find appropriate materials, research advice, etc. Please be specific (use additional pages if needed) N/A

- c. Sponsored public educational programming in historic preservation. Examples include training sessions offered to the public, walking tours, open houses, lectures, Preservation Month activities, etc. (use additional pages if needed The annual historic preservation award was presented to the non-profit organization 'Preserve Council Bluffs' in recognition of their restoration work on the Jean and Inez Bregant Residence located at 517 South Fourth Street, Council Bluffs, Iowa. The property is entered in the National Register of Historic Places and is designated as a local historic landmark. An award presentation/reception was held at the property on May 18, 2016. Speakers at the reception included the Mayor, Historic Preservation Chairperson, City Staff and members of Preserve Council Bluffs.

6. If the city or county amended its historic preservation ordinance or resolution or passed additional ordinances or resolutions that impact historic properties, please attach copies of the amendments and new ordinances or resolutions. N/A

(As a reminder, before your elected officials approve local districts or ordinances, you must send a copy to the State Historic Preservation Office for comment.)

7. If new or revised design standards and/or guidelines were developed and adopted during 2016, please attach a copy. N/A

8. Are there any particular issues, challenges, and/or successes your preservation commission has encountered or accomplished this year? (use additional pages if needed) N/A

9. Does your commission have a website and if so, what is the address?
<http://www.councilbluffs-ia.gov/971/Historic-Preservation-Commission>

Section III Historic Preservation Program Administration

- The CLG will organize and maintain a historic preservation commission, which must meet at least three (3) times per year.
- The commission will be composed of community members with a demonstrated positive interest in historic preservation, or closely related fields, to the extent available in the community.
- The commission will comply with Iowa Code Chapter 21 (open meetings) in its operations.
- Commission members will participate in state-sponsored or approved historic preservation training activities.

10. List dates of meetings held (please note these are meetings actually held with a quorum, not just those that were scheduled). January 6th, March 2nd, April 6th, June 1st, July 6th, September 7th and October 5th.

11. We recommend that each commission have a budget with a minimum of \$750 to pay for training and other commission expenses. In 2016, what was the dollar amount for the historic preservation commission's annual budget? \$0

12. Where are your official CLG files located?
Council Bluffs Community Development Department

13. Please update the attached CLG Personnel Information Table (this must be completed). See attached

14. Please attach biographical sketches for commissioners who were newly appointed in 2016 or 2017. Please be sure newly appointed commissioners sign and date their statement. There were no new appointees to the Historic Preservation Commission in 2016.

15. Please complete the 2016 Commission Training Table. See attached.

PLEASE SIGN and DATE

Signature of person who completed this report

Date

Signature of Mayor or Chairman of the Board of Supervisors

Date

Please retain a copy for your official CLG file and send one hard copy with original signatures by February 28, 2017 to:

Paula A. Mohr
State Historical Society of Iowa
600 East Locust St,
Des Moines IA 50319-0290
Paula.mohr@iowa.gov

If you have questions, please contact me at: (515) 281-6826.

Thank you for your timely response!

2016 Historic Preservation Training Table

An important requirement of the Certified Local Government program is annual training undertaken by at least one member of the historic preservation commission and/or staff liaison. In this table, provide information about the commissioners' involvement in historic preservation training, listing the name of the conference, workshop or meeting (including on-line training opportunities); the sponsoring organization; the location and date when the training occurred. Be sure to provide the names of commissioners, staff, and elected officials who attended.

Name of Training Session: **2016 Preserve Iowa Summit**

Sponsoring organization: **SHPO/Davenport Historic Preservation Commission**

Location: **Davenport, Iowa**

Date: **September 15-17, 2016**

Names of commission members, staff and elected officials who attended the Preserve Iowa Summit (*please note this must be completed. If no one attended, enter none*):

None

Name of Training Session: _____

Sponsoring organization: _____

Location: _____

Date: _____

Names of historic preservation commissioners, staff and elected officials who attended:

Name of Training Session: _____

Sponsoring organization: _____

Location: _____

Date: _____

Names of historic preservation commissioners, staff and elected officials who attended:

Name of Training Session: _____

Sponsoring organization: _____

Location: _____

Date: _____

Names of historic preservation commissioners, staff and elected officials who attended:

Biographical Sketch
Applicant for Historic Preservation Commission

NAME: _____

ADDRESS: _____

WORK PHONE NUMBER WORK: (____) _____

HOME PHONE NUMBER: (____) _____

EMAIL ADDRESS: _____

INTEREST IN LOCAL HISTORY AND HISTORIC PRESERVATION (Describe education, employment, memberships, publications, and/or other activities which indicate your interest in and commitment to historic preservation; or provide a statement detailing your interest in local history and commitment to historic preservation; use extra sheets if necessary)

EDUCATION: _____

EMPLOYMENT: _____

INTERESTS: _____

While serving on the _____ Historic Preservation Commission, I will work to insure that the commission enforces the Historic Preservation Ordinance/Resolution; upholds the CLG Agreement with the State of Iowa, and works in compliance with the Secretary of the Interior's Standards for Archaeology and Historic Preservation.

Signature

Date

CLG Personnel Table

A. Please list the names of the Historic Preservation Commissioners who served during calendar year 2016: Ed Cain, Teresa Dowell, Matt Johnson, Roxanne Johnson, Sally Madsen, Cal Petersen and Alisa Roth

B. CHIEF ELECTED OFFICIAL 2016 (note this is beginning January 2017)

Name of Mayor, Chairman of Board of Supervisors, or President of LUD Trustees: Mayor

First Name: Matthew

Last Name: Walsh

Mailing Address: 209 Pearl Street, Council Bluffs, IA 51503

Phone Number: (712) 328-4601

Email Address: mayor@councilbluffs-ia.gov

C. STAFF PERSON FOR THE HISTORIC PRESERVATION COMMISSION

First Name: Rose

Last Name: Brown

Job Title: Planning Coordinator

Mailing Address: 209 Pearl Street, Council Bluffs, IA 51501

Phone Number: (712) 328-4629

Email Address: rbrown@councilbluffs-ia.gov

2017 HISTORIC PRESERVATION COMMISSION: Please note that this is for 2017

Please complete the following and provide information about your new 2016 commission.

If the commissioner represents a locally designated district, provide the name of the district (Representative, Name of Historic District). Specify the month, day, and year that the commissioner's term will end (Term Ends). If a commission member serves as contact with the State Historic Preservation Office for the Commission, please circle yes. **Electronic and mailed communication will be sent to the staff person for the commission and the contact.**

CHAIRPERSON/COMMISSIONER

First Name: Matt

Last Name: Johnson

Mailing Address (please provide full mailing address including city and zip code):

114 West Broadway, Council Bluffs, IA 51503

Home Phone Number: (712) 322-0306

Work Phone Number: (402) 659-2110

Email Address: repetitions@hotmail.com

Representative, Name of Local Historic District: N/A

Term Ends: Month December Day 31 Year 2017

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No

VICE CHAIRPERSON/COMMISSIONER

First Name: Ed

Last Name: Cain

Mailing Address (please provide full mailing address including city and zip code):

26 Indian Hills Road, Council Bluffs, IA 51503

Home Phone Number: (402) 598-8763

Work Phone Number: N/A

Email Address: restoremainstreet@yahoo.com

Representative, Name of Local Historic District: N/A

Term Ends: Month 12 Day 31 Year 2017

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No

SECRETARY/COMMISSIONER

First Name: N/A

Last Name: N/A

Mailing Address (please provide full mailing address including city and zip code): N/A

Home Phone Number: ()

Work Phone Number: ()

Email Address: N/A

Representative, Name of Local Historic District: N/A

Term Ends: Month N/A Day N/A Year N/A

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No

COMMISSIONER

First Name: Sally

Last Name: Madsen

Mailing Address (please provide full mailing address including city and zip code):
534 Oakland Avenue, Council Bluffs, IA 51503

Home Phone Number: (712) 323-0235

Work Phone Number: () N/A

Email Address: sallymadsen@cox.net

Representative, Name of Local Historic District: N/A

Term Ends: Month 12 Day 31 Year 2017

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No

COMMISSIONER

First Name: Alisa

Last Name: Roth

Mailing Address (please provide full mailing address including city and zip code):

142 West Broadway, Suite 138, Council Bluffs, IA 51501

Home Phone Number: () N/A

Work Phone Number: (712) 256-3156

Email Address: alisa@bloomworks.omhcoxmail.com

Representative, Name of Local Historic District: N/A

Term Ends: Month 12 Day 31 Year 2017

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No

COMMISSIONER

First Name: Teresa

Last Name: Dowell

Mailing Address (please provide full mailing address including city and zip code):

445 Glen Avenue, Council Bluffs, IA 51503

Home Phone Number: (402) 981-5406

Work Phone Number: () N/A

Email Address: wjrsmith@cox.net

Representative, Name of Local Historic District: N/A

Term Ends: Month 12 Day 31 Year 2018

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No

COMMISSIONER

First Name: Roxanne

Last Name: Johnson

Mailing Address (please provide full mailing address including city and zip code):

2126 East Kanesville Boulevard, Council Bluffs, IA 51503

Home Phone Number: (402) 981-5406

Work Phone Number: () N/A

Email Address: wjrsmith@cox.net

Representative, Name of Local Historic District: N/A

Term Ends: Month 12 Day 31 Year 2017

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No

COMMISSIONER

First Name: Calvin

Last Name: Petersen

Mailing Address (please provide full mailing address including city and zip code):

20 Circle Drive, Council Bluffs, IA 51503

Home Phone Number: (712) 328-0321

Work Phone Number: () N/A

Email Address: calvin-karen@hotmail.com

Representative, Name of Local Historic District: N/A

Term Ends: Month 12 Day 31 Year 2015

Please indicate if this person serves as the Contact with the State Historic Preservation Office for the Commission. Circle Yes No